P20000003754

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
_	_	_
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Consist Instructions to	Filler Officer	
Special Instructions to	Filing Officer:	
<u> </u>		





900376347239

11/12/21--01008--010 **85.00

FILED 21 KG/ 12 PH I2: 50

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: CARLOS TILES S	SERVICES INC				
DOCUMENT NUM	D20000002751					
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	itter to the following:				
	CALOS A PALIZA					
	Name of Contact Person					
	Firm/ Company					
	4516 W KNOW ST					
	TAMBA EL 12614	Address				
	TAMPA FL 33614	City/ State and Zip Cod				
	GUILLENMICH@ICLOUD					
		sed for future annual report	notification)			
For further informati	on concerning this matter, pleas	se call:				
CARLOS A PALIZ.	Α	at (845-1628			
Name	of Contact Person		de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ar Di P.C	ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303			

Articles of Amendment Articles of Incorporation of

	y filed with the Florida Dept. of State)	•
22000003754	-	
(Document Number o	f Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation adopts the following amo	endment
. If amending name, enter the new name of the corporation:		
ame must be distinguishable and contain the word "corporation," " Inc.," or Co.," or the designation "Corp," "Inc," or "Co". , chartered," "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbreviation "Co	new orp.," word
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
,		
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
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If amonding the positioned and a silver to the silver to t		_نِي
. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ess in Florida, enter the name of the	
Name of New Registered Agent		
(Florida str	et address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Do	De	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP	_	MICHEL I GUILLEN	6617 N HUBERT
Add			· ·····	TAMPA FL 33614
X Remove				
2) Change		_		
Add				-
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	_	_		-
Add				
Remove				
6) Change		_		
Add				
Remove				

amending or adding additional Article ttach additional sheets, if necessary). (a		-			
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 			<u>.</u>		
an amendment provides for an exchang	ve reclassificati	ion or cancel	ation of issued	l charac	
rovisions for implementing the amends	ment if not cont	ained in the a	mendment its	elf:	
(if not applicable, indicate N/A)					
					
	 				
				· · · · · · · · · · · · · · · · · · ·	
				 -	
					_

The date of each amendment(s) ad	option:	11/08/2021	, if other than the
date this document was signed.	. /		
Effective date <u>if applicable</u> :	11/0	18/2021	
	(no more than 90 days after o	amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutor partment of State's records.	ry filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of dire	ctors without shareholder action and	shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of varieties for approval.	votes cast for the amendment(s)	
	roved by the shareholders through voting peach voting group entitled to vote separate		
"The number of votes east f	or the amendment(s) was/were sufficient	for approval	
by		,,,	
	(voting group)		
Dated	11/8/2021		
Signature	YIL		
(By a dir selected	ector, president or other officer – if direct, by an incorporator – if in the hands of a id fiduciary by that fiduciary)		
-	Michel (BuillEN	<u> </u>
	(Typed or printed name of person	on signing)	
	· V P		
_	(Title of person signing)		